STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation S.D. SEC. OF STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077		
1. TITLE OF NEWSPAPER Tr. County New.		2. DATE 10-1-09
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLISH	HED ANNUALLY 3B. AN PRICE	NUAL SUBSCRIPTION \$ 25 00 7750
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code)		
(Not printers) POBOX to Tiene Clay SD 57037		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE		
PUBLISHER (Not printers) 1000 Washington St Centerville SD 57014		
6. FULL NAME OF PUBLISHER: Share at Ally Sch Hill 7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and		
addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name		
and address, as well as that of each individual must be given.		
FULL NAME COMPLETE MAILING ADDRESS		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1		
PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so		
state. If more space is needed, list on back of this form.		
	AVERAGE NO. COPIES	ACTUAL NO. COPIES
9. EXTENT AND NATURE OF CIRCULATION	EACH ISSUED PRECEDING 12	ISSUED NEAREST TO FILING DATE
A.TOTAL NO. COPIES (Net Press Run)	MONTHS	1000
B.PAID AND/OR REQUESTED CIRCULATION	l was	
 Sales through dealers and carriers, street vendors and counter sales. 	200	205
Mail Subscription (Paid and or requested)	280	274
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	480	479
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	26 16	16
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	4	5
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	5Q0	21
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	80	79
2. Return from News Agents		
G.TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	600	600
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public I swear that the statements made by me are true, correct, and complete:		
1 shear that the statements made by the are true, correct, and complete.		
(Signature)	Publisher	(Title)
State of South Dakota Sworn to before me this 7 day of Ckbber, 2009		
8 Julius		
(Seal) + succession expires: SHANE HILL SHANE HILL		
Form: SOS REC 051 7/2004 SEAL NOTARY PURLIC SEAL SOUTH DAKOTA		
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